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(54) **Button and continuous loop for fixation of ligaments**

(57) A reconstruction system for ligament repair employing a continuous loop/button construct. The button has an oblong configuration and is provided with at least

one inside eyelet that allows the passage of the continuous loop, preferably a suture loop. The continuous loop/button construct of the present invention may be used for fixation of bone to bone, or of soft tissue to bone.

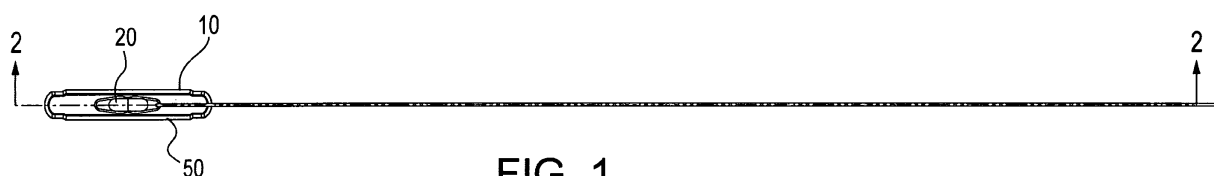


FIG. 1

Description

[0001] The present invention relates to the field of surgery and, more particularly, to a button and continuous loop for fixation of ligaments in reconstructive surgeries.

[0002] Reconstructive surgeries, particularly anterior cruciate ligament (ACL) reconstruction, are well known in the art. Methods of ACL reconstruction using interference screw fixation are described, for example, in U.S. Pat. Nos. 5,211,647 and 5,320,626. In general, these methods of tenodesis involve drilling a tunnel through the tibia, drilling a closed tunnel (socket) into the femur, inserting a substitute ACL graft into the tunnels, and securing the grafts to the walls of the tibial and femoral tunnels using interference screws or the like.

[0003] The device for ligament reconstruction of the present invention, a button with a continuous suture loop, can be used in an alternative fixation technique that does not require the use of interference screws.

[0004] The present invention provides a reconstruction system for ligament repair. The system of the present invention comprises a continuous loop/button construct used for fixation of bone to bone, or of soft tissue to bone. The button has an oblong configuration and is provided with at least one inside eyelet that allows the passage of the continuous loop, preferably a suture loop. The continuous loop/button construct of the present invention may be used for fixation of bone to bone, or of soft tissue to bone.

[0005] Other features and advantages of the present invention will become apparent from the following description of the invention which refers to the accompanying drawings.

[0006] Embodiments of the present invention will now be described with reference to the accompanying drawings, in which:

[0007] Figure 1 illustrates a top view of a button according to a first embodiment of the present invention.

[0008] Figure 2 illustrates a cross-sectional view of a continuous loop/button construct employing the button of Figure 1.

[0009] Figure 3(a) illustrates a top view of a button according to a second embodiment of the present invention.

[0010] Figure 3(b) illustrates a cross-sectional view of the button of Figure 3(a).

[0011] Figure 3(c) illustrates a top view of a button according to a third embodiment of the present invention.

[0012] Figure 3(d) illustrates a cross-sectional view taken along line B-B of the button of Figure 3(c).

[0013] Figure 3(e) illustrates an enlarged top view of an eyelet of the button of Figure 3(a).

[0014] Figure 3(f) illustrates a perspective view of a button according to a fourth embodiment of the present invention.

[0015] Figures 4-9 illustrate various steps of a method of ACL reconstruction employing the continuous loop/button construct of Figure 2 and according to an embodiment of the present invention.

[0016] Figure 10 illustrates the continuous loop/button construct of Figure 2 used for BTB fixation and according to an embodiment of the present invention.

[0017] Figure 11 illustrates the continuous loop/button construct of Figure 2 used for BTB fixation and according to another embodiment of the present invention.

[0018] Figure 12 illustrates a continuous suture loop which transitions from one strand to three strands.

[0019] Figure 13 illustrates a continuous loop/button construct employing the suture loop of Figure 12 and in accordance with an embodiment of the present invention.

[0020] The present invention provides a reconstruction system for ligament or tendon repair. The system of one embodiment of the present invention comprises a continuous loop/button construct used for fixation of bone to bone, or of soft tissue to bone. The button has an oblong configuration and is provided with an inside eyelet that allows the passage of the continuous loop, preferably a suture loop. The button may be formed, for example, of titanium, PEEK or PLLA. The suture may be a single high strength suture such as FiberWire® suture, sold by Arthrex, Inc. of Naples, Florida, or may be formed of a plurality of suture strands configured to separate from a single strand to a plurality of strands in the continuous loop. The continuous loop/button construct of the present invention may be used for fixation of bone to bone, or of soft tissue to bone.

[0021] Referring now to the drawings, where like elements are designated by like reference numerals, Figures 1-3 and Figure 13 illustrate various embodiments of a continuous loop/button construct 100, 200 of the present invention provided with a button 10, 110, 210, 310 preferably of titanium or titanium alloy, and a continuous loop 30, 230 attached to the button.

[0022] As shown in the drawings, the button of the present invention preferably has a body 50, 150, 250, 350 with an exemplary oblong configuration and a width that is preferably less than about 1mm narrower than the width of the drill hole through which the button is inserted and subsequently passed through. The button is provided with at least one inside opening or eyelet 20, 120 (preferably two inside eyelets or openings) that allows the passage of the continuous loop. In the embodiments shown in Figures 1, 2 and 3(a)-(c), the button is provided with two eyelets or openings 20, 120 that have a specific configuration to allow the passage of continuous loop 30, 230 (preferably a suture loop). The eyelets may be circular, oblong, elliptical, or may have any other configuration, as desired. For example, Figure 3(e) illustrates an exemplary configuration for at least one of the two eyelets 120 of button 110 of Figure 3(a). Figure 3(f) illustrates an additional configuration for single eyelet 320 of button 310.

[0023] Preferably, body 50, 150, 250, 350 of the button of the present invention has a length of about 10mm to about 20mm, more preferably of about 12mm to about 15mm, and a width that is less than about 1mm narrower than the width of the drill hole through which the button

is inserted and subsequently passed through. Preferably, button 10 is very small, having a width that allows it to pass through a 3mm cortical pin hole without over drilling, which in turn saves time and preserves bone.

[0024] As shown in Figures 2 and 13, the button is provided with at least an inside eyelet 20 that allows the passage of continuous loop 30, 230 (preferably a suture loop). In an exemplary embodiment, the suture loop may be a single high strength suture such as FiberWire® suture, sold by Arthrex, Inc. of Naples, Florida, and described in U.S. Patent No. 6,716,234. FiberWire suture is formed of an advanced, high-strength fiber material, namely ultrahigh molecular weight polyethylene (UHMWPE), sold under the tradenames Spectra (Honeywell) and Dyneema (DSM), braided with at least one other fiber, natural or synthetic, to form lengths of suture material. The FiberWire suture may include a core within a hollow braided construct, the core being a twisted yarn of UHMWPE. The suture may optionally include filaments of various colors.

[0025] The continuous loop may be available in various lengths and may comprise various materials such as nitinol or suture, preferably a high-strength suture material, or combinations of such materials. Preferably, the suture loop is the equivalent of about three #5 FiberWire® suture strands, with a wide atraumatic graft interface to protect the graft integrity.

[0026] In another exemplary embodiment, and as shown in Figures 12 and 13, the continuous loop 230 may be formed of a plurality of suture strands configured to separate from a single strand to a plurality of strands in a continuous loop. For example, the continuous loop 230 comprises a braided strand 230a of suture (such as FiberWire, for example) that is configured to trifurcate from one single strand to three strands 230b, as shown in Figure 12. In this exemplary "three strand" design, the continuous loop is configured to pass through the button component at the single strand section of the loop, as shown in Figure 13.

[0027] In additional embodiments, the continuous loop of the present invention may include suture filaments of various colors. For example, suture loop 30 of Figure 2 is a braided ultrahigh molecular weight polyethylene (UHMWPE) three-strand loop of white color (30a) which may optionally include blue filaments (30b) and which may be optionally coated with a silicon elastomer, for example, prior to the formation of the loop. The loop may be formed by stitching ends of a suture strand initially inserted through the opening or eyelet 20 of the button, to form a stitched region of the loop which ends below the button (for example, a minimum of 8mm below the bottom surface of the button) to reduce the assembly profile when pulled taught. The suture loop/button construct 100, 200 of the present invention is preferably used in conjunction with passing sutures 33 (Figure 2) that also pass through eyelet 20.

[0028] The system of one embodiment of the present invention may be employed for fixation of bone to bone,

or for fixation of soft tissue to bone. In an exemplary embodiment, the continuous loop/button construct 100, 200 is used to secure a soft tissue graft in a bone socket in a retrograde manner, for example. According to another exemplary embodiment, the continuous loop/button construct 100, 200 is used to secure a bone-to-bone (BTB) graft in a femoral tunnel or socket in a retrograde manner, for example. The bone socket or tunnel may be formed by a conventional (antegrade manner) or by a retrograde manner (for example, by employing a retrodrill cutter).

[0029] In these particular and only exemplary embodiments, a method of ACL reconstruction using the continuous loop/button construct 100, 200 comprises, for example, the steps of: (i) drilling a femoral tunnel or socket in an antegrade manner, or retrograde manner (using a retrodrill cutter which is inserted in a retrograde manner through the femur); (ii) securing a graft (soft tissue graft or BTB graft) to the continuous loop/button construct 100, 200 of the present invention; (iii) passing the graft with the button through the femoral tunnel; and (iv) securing the button to the femoral cortex once the button exits the femoral socket.

[0030] The exemplary technique of ACL reconstruction detailed above is further described below with reference to Figures 5-8 (for soft tissue graft) and with reference to Figures 9 and 10 (for BTB graft).

[0031] According to one embodiment of the present invention, a femoral socket is prepared by employing a retrodrill device provided with a retrodrill cutter detachable from a retrodrill guide pin, in the manner described in U.S. Patent Application Publication No. 2004/019901664, entitled "ACL Reconstruction Technique Using Retrodrill."

[0032] As described in U.S. Patent Application Publication No. 2004/019901664, a retrodrill device for ACL reconstruction is provided with a retrodrill cutter detachable from a retrodrill guide pin. The retrodrill cutter is inserted in a retrograde manner through the femur by employing a retrodrill guide pin provided with depth markings. Once the proper anatomical position in the joint for creating a femoral socket has been located, the marking hook of a drill guide is placed through the antero-medial portal and inserted in an "over-the-top" position according to an outside-in technique. The retrodrill guide pin is then inserted into the sleeve of the drill guide and drilled through the lateral femur until contact is made with a marking hook of the drill guide. The retrodrill cutter is then placed into the anatomical joint space through the antero-medial portal and positioned so that the retrodrill guide pin can be threaded onto the retrodrill cutter. Once secured within the retrodrill cutter, the retrodrill guide pin is retracted in a retrograde manner until the retrodrill cutter contacts the femoral intercondylar notch. The proximal end of the retrodrill guide pin is coupled to a drill. The retrodrill cutter is then rotated and retracted into the lateral femur to the proper depth as measured on the outside of the knee by the depth markings on the retrodrill guide pin. After the femoral socket is formed in this man-

ner, the retrodrill cutter is removed from the retrodrill guide pin by applying a reversed drilling motion to the guide pin while grasping the cutter.

[0033] Formation of a tibial tunnel or socket by the method described above or by a conventional method may be carried out before or after the formation of the femoral socket.

[0034] Once the femoral and tibial tunnels or sockets have been completed, graft insertion and fixation may be subsequently carried out. According to an exemplary embodiment of the present invention, and as illustrated in Figures 4-9, graft 80 which may be a soft tissue graft is folded in half over the loop 30 of the button 10 and tension is applied. A sterile marker may be employed to draw a line 81 on the graft, the line indicating a distance that equals the length of the femoral socket or tunnel plus about 6mm (if using a 12mm button) or about 8mm (if using a 15mm button), for example, from the looped end of the graft. This mark 81 will be used to indicate when the button 10 has exited the femoral tunnel or socket.

[0035] Subsequently, passing sutures 33 are pulled and graft 80 is passed into femoral tunnel or socket 82. When the line 81 marked on the graft 80 reaches the opening of the femoral socket or tunnel 82 on the femoral cortex, a slight popping sensation may be felt as the button 10 exits and begins to flip horizontally on the femoral cortex (Figures 7-10). Distal traction on the graft and release of the passing sutures facilitate complete deployment of the button. The passing suture 33 may be removed and tibial fixation may be completed.

[0036] Figures 10 and 11 illustrate a BTB graft 90 which is secured within a femoral tunnel by employing the continuous loop/button construct 100 of the present invention. BTB graft 90 is secured within the femoral tunnel in a manner similar to that described above with reference to the soft tissue graft 80. The femoral tunnel is formed preferably in a retrograde manner and the continuous loop/button construct 100 is also preferably inserted in a retrograde manner.

[0037] Although the present invention has been described in connection with preferred embodiments, many modifications and variations will become apparent to those skilled in the art. While preferred embodiments of the invention have been described and illustrated above, it should be understood that these are exemplary of the invention and are not to be considered as limiting. Accordingly, it is not intended that the present invention be limited to the illustrated embodiments, but only by the appended claims.

Claims

1. A suture loop/button construct, comprising:

at least one suture loop; and
a button attached to the at least one suture loop.

2. The suture loop/button construct of claim 1, wherein the button comprises at least one opening configured to allow the suture loop to pass through it.

3. The suture loop/button construct of claim 1, wherein the suture loop is a continuous suture loop.

4. The suture loop/button construct of claim 1, wherein the suture loop is formed of a suture material comprising ultrahigh molecular weight polyethylene.

5. The suture loop/button construct of claim 1, wherein the button has an oblong configuration.

6. The suture loop/button construct of claim 1, wherein the button has a length of about 10 to about 20mm.

7. The suture loop/button construct of claim 1, wherein the button has a width that is less than about 1mm narrower than the width of a tunnel through which the button is inserted and passed through.

8. The suture loop/button construct of claim 1, further comprising a plurality of suture loops.

9. The suture loop/button construct of claim 1, wherein the suture loop has a first portion having a single suture strand and a second portion having a plurality of single suture strands.

10. The suture loop/button construct of claim 1, wherein the button is formed of titanium or titanium alloy.

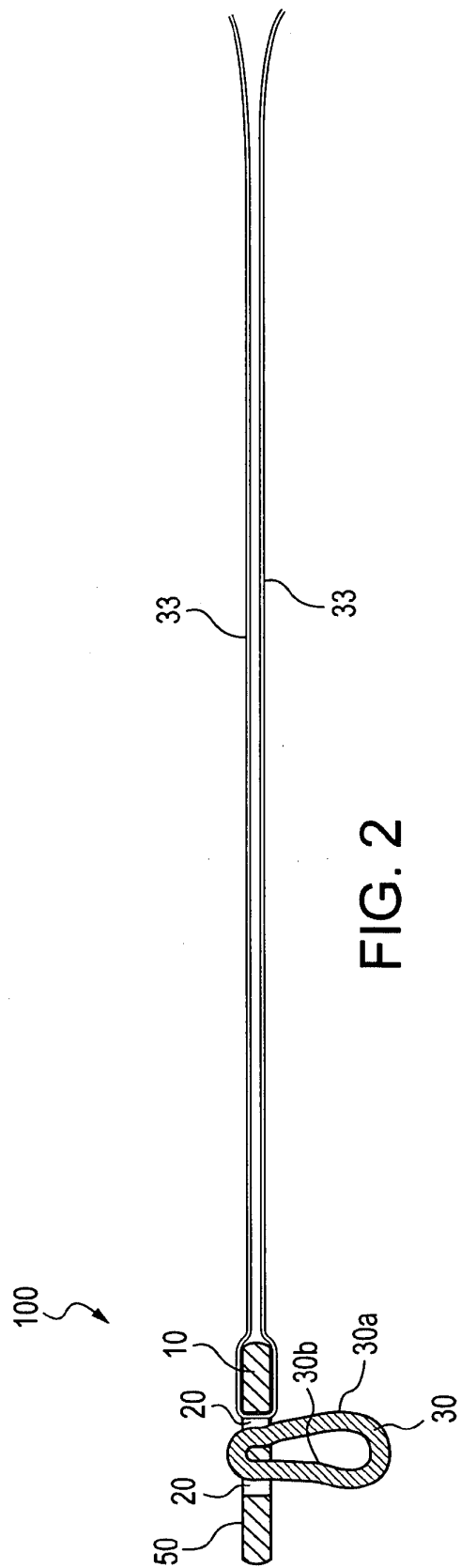
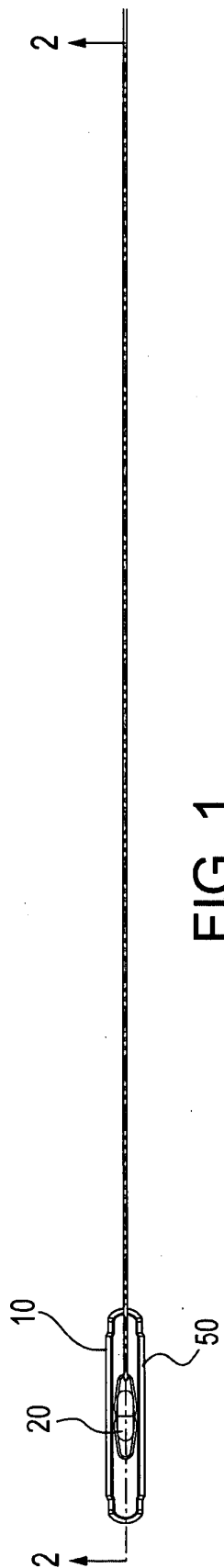
11. A continuous suture loop/button assembly, comprising:

a button comprising a body and two eyelets extending through opposing surfaces of the body;
a continuous suture loop attached to the two eyelets; and
a suture strand attached to one of the two eyelets.

12. The continuous suture loop/button assembly of claim 11, wherein the suture loop comprises strands of a suture comprising ultrahigh molecular weight polyethylene and the button is formed of titanium or titanium alloy.

13. The continuous suture loop/button assembly of claim 11, wherein the suture loop has a stitched region.

14. The continuous suture loop/button assembly of claim 11, wherein the suture loop is coated with an elastomer.



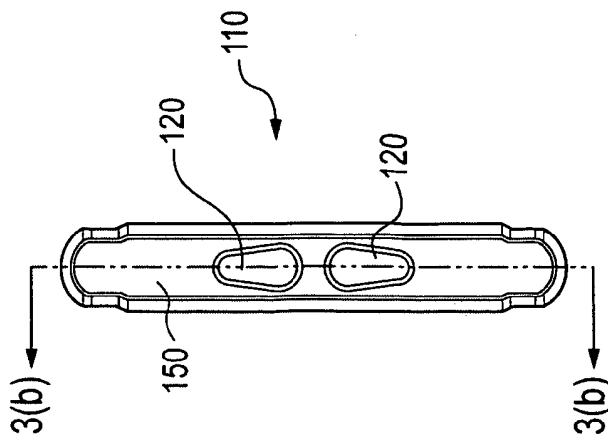


FIG. 3(a)

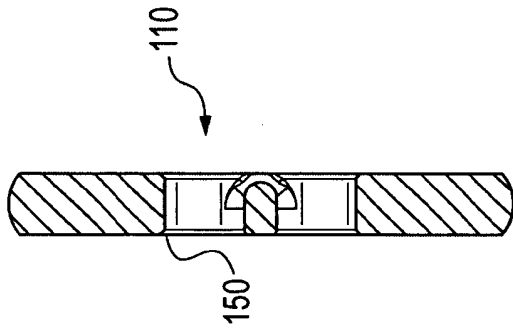


FIG. 3(b)

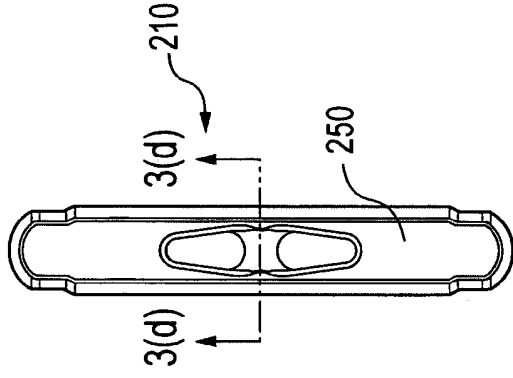


FIG. 3(c)

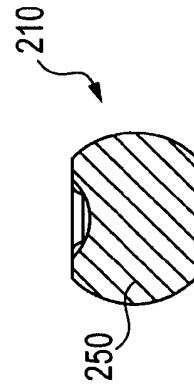


FIG. 3(d)

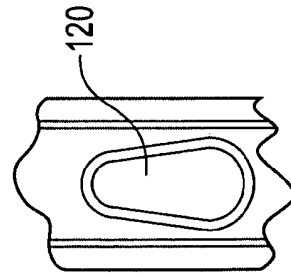


FIG. 3(e)

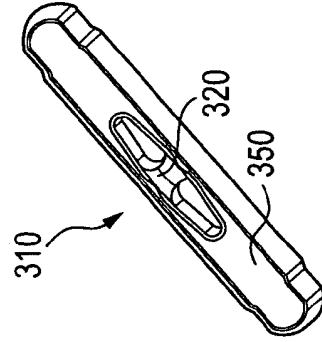


FIG. 3(f)

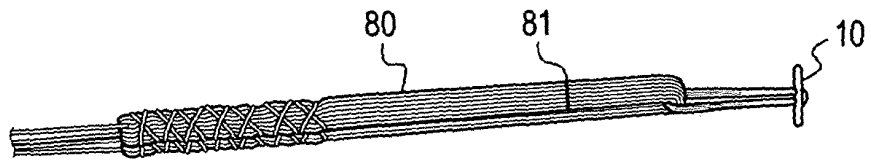


FIG. 4

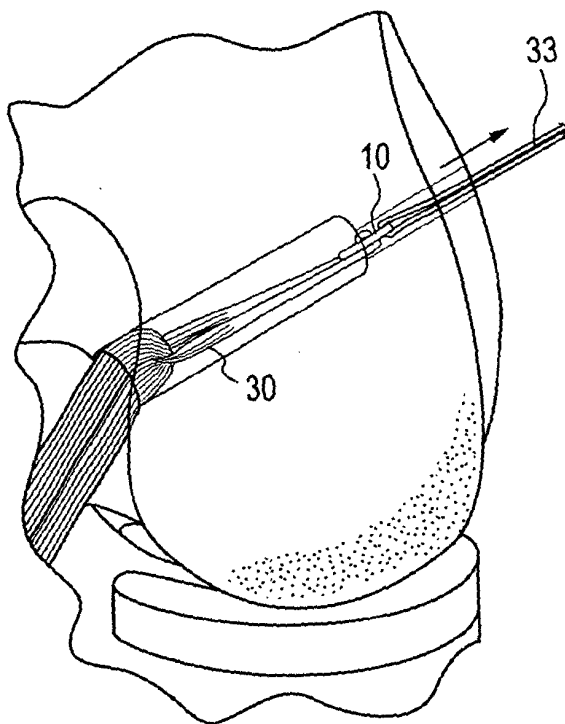


FIG. 5

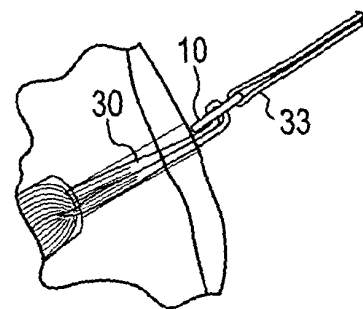


FIG. 5(a)

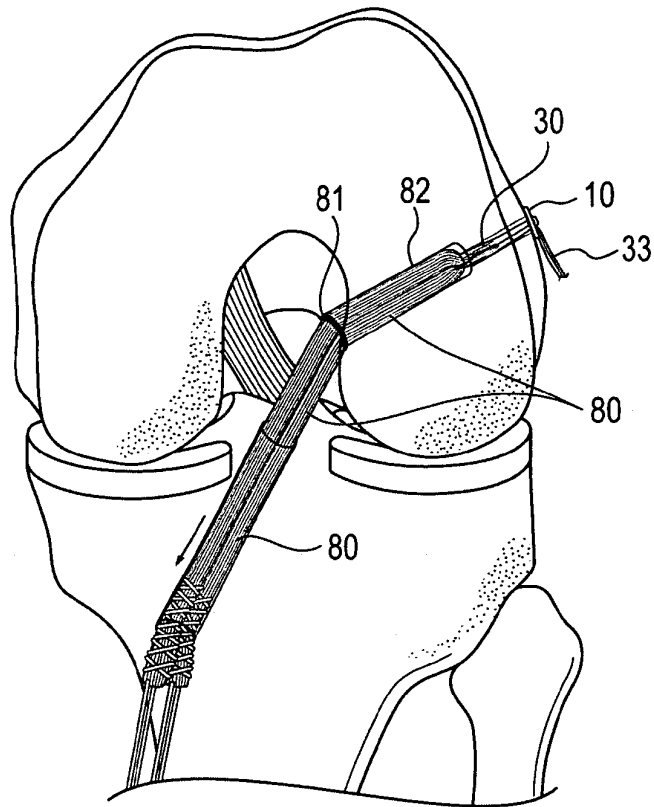


FIG. 6

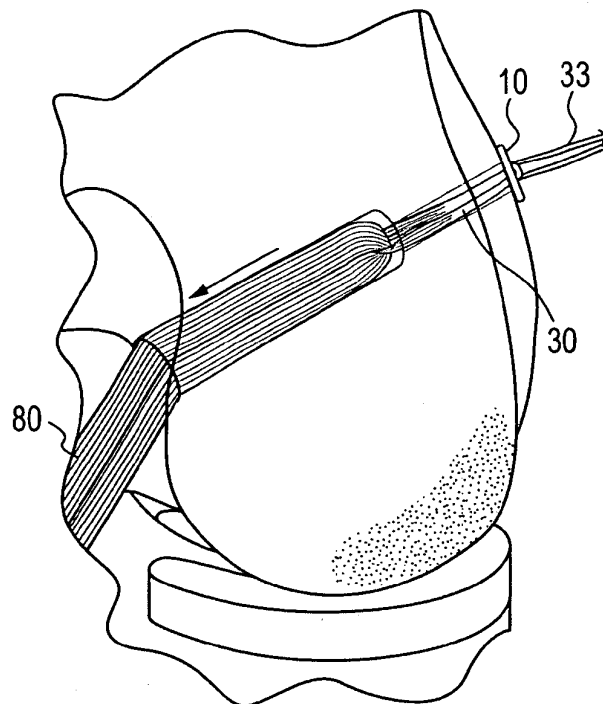


FIG. 7

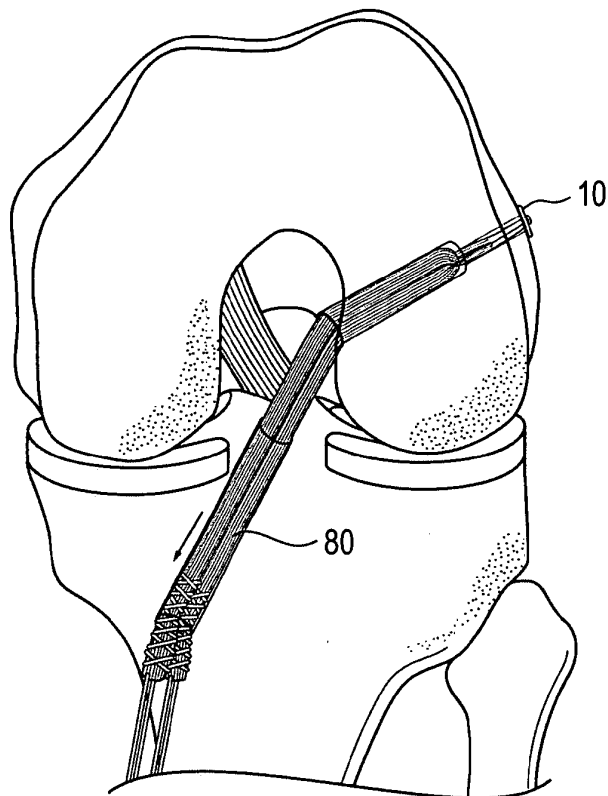


FIG. 8

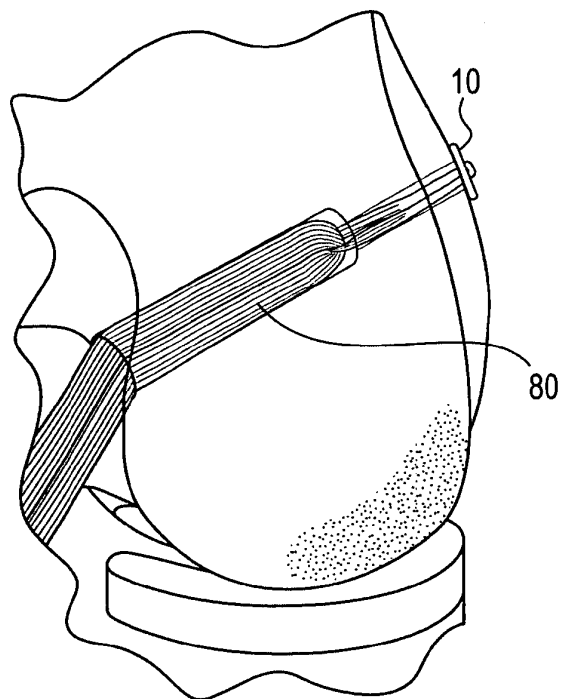


FIG. 9

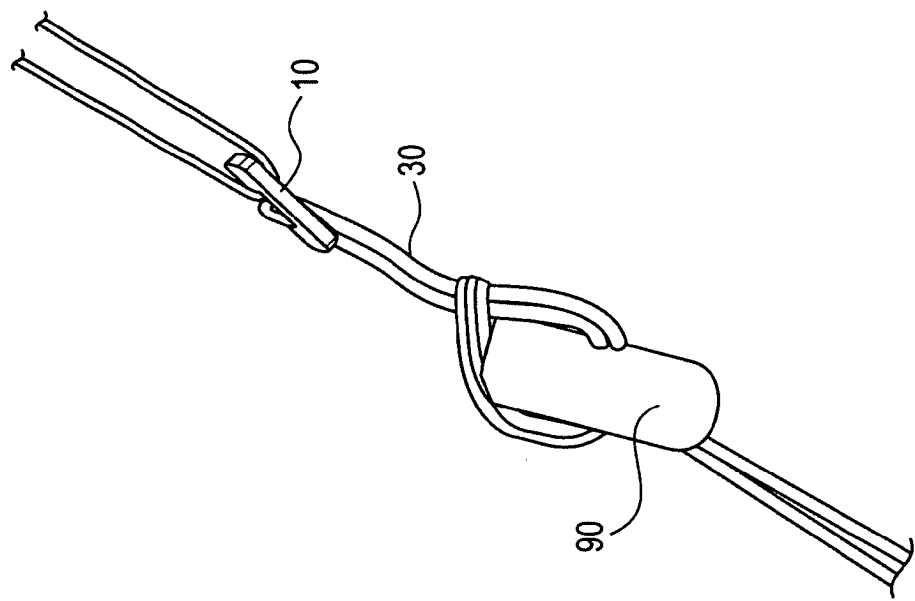


FIG. 11

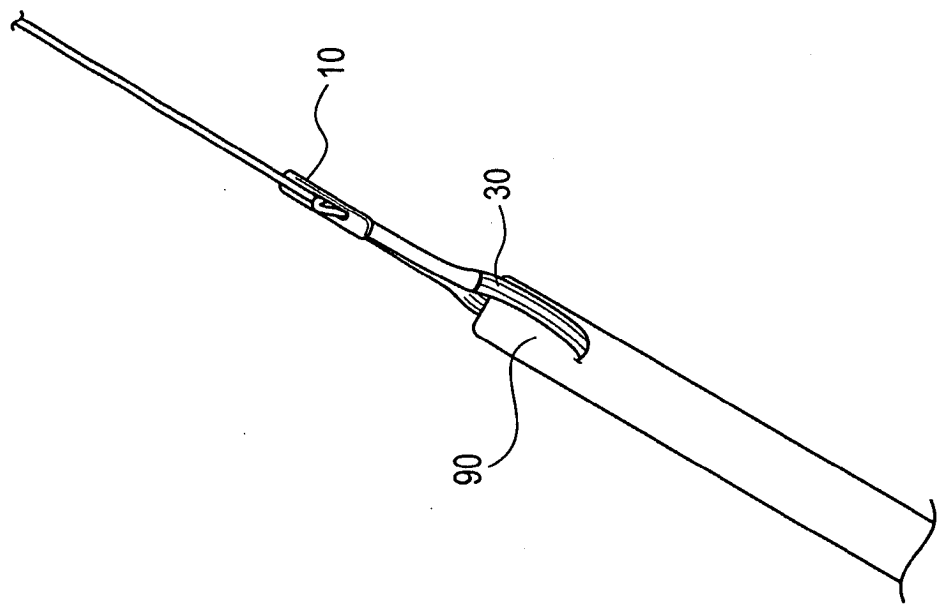


FIG. 10

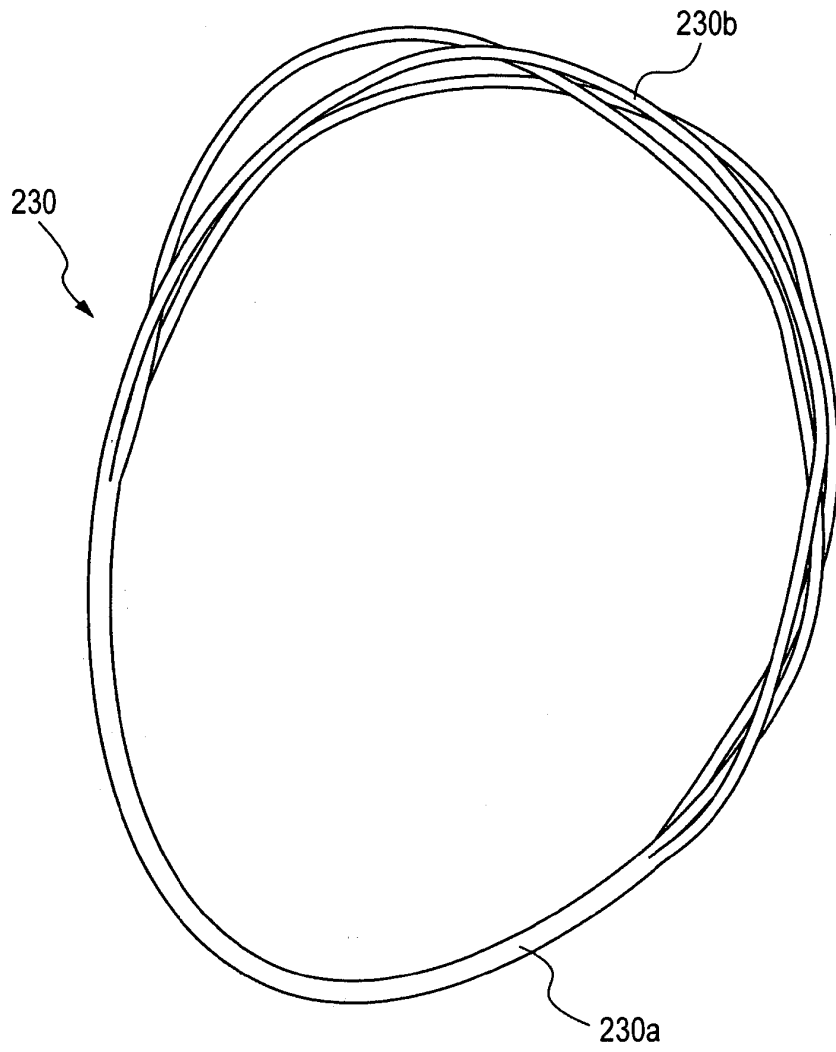


FIG. 12

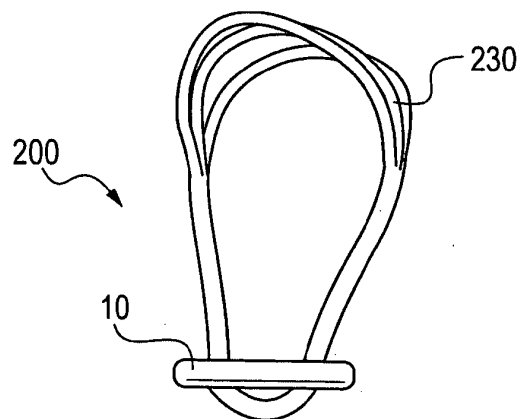


FIG. 13

REFERENCES CITED IN THE DESCRIPTION

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Patent documents cited in the description

- US 5211647 A [0002]
- US 5320626 A [0002]
- US 6716234 B [0024]
- US 2004019901664 A [0031] [0032]